REPORTS.

Leprosy in Burma. Report on State of Public Health for 1937.

Three hundred and fifty-seven deaths were reported from this disease during the year under report. There is, however, no doubt but that it is a much more serious problem than would appear from these figures. The fact is that mortality from leprosy is regarded only in towns, and, therefore, we have no real information as to its incidence. The problem is not easy and it is not believed that the extension of compulsory notification would necessarily yield the information desired. Compulsory notification of this disease which at present is only in force in Mônywa and Maymyo might result in even more evasion than exists at present with voluntary measures.

The 375 deaths reported during the year show an increase of 65 deaths over the previous year, and give a death rate of 0.25. But these figures cannot be accepted as reliable as the largest number of deaths were recorded in Rangoon and Mandalay, where leper asylums exist and consequently deaths are to be expected and are reported accurately. Such accurate information

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as does exist with regard to the incidence of leprosy in Burma, has been obtained from surveys that have been carried out in rural areas by the Public Health Department. These surveys show that the last recorded census figure of II,I27 lepers is very wide of the real total. A properly carried out survey revealed in the case of Meiktila District a figure of 16.57 lepers per 1,000 of population. It should be clearly understood that, while it is believed that the total number of persons afflicted with this dreadful disease may come to as many as 200,000, it is not thought that leprosy is rapidly increasing. It is probable that an increase in our general knowledge regarding this disease and the interest displayed in it during the past few years have revealed a state of aftairs prevalent for many years. Anti-leprosy measures are urgently called for to prevent a possible flare-up as a result of neglect in the past, and to prevent its incursion from the smaller villages and the rural areas in districts in which it is most terribly prevalent into the towns and large villages where it is now comparatively rare. A special Leprosy Officer is entertained on the cadre of the Department and has for the past year or so endeavoured to interest local bodies in the establishment of leper colonies for the voluntary segregation of victims of this disease. It is not believed that it will ever be possible to segregate all infectious cases of leprosy in Burma; it is thought, however, that by this means it will be possible to segregate a sufficient percentage of infectious lepers so as to effect a material reduction in the incidence of this disease in the generations yet unborn. Much obscurity still surrounds the epidemiology of leprosy, but most authorities now believe that infection is most likely and most dangerous in childhood. Public attention and interest in this disease has recently been aroused by the appeal made by His Excellency the Governor on the occasion of his opening the Rangoon Health Week Exhibition at the end of the year under report. An Association has been formed with the object of attempting to materially reduce the incidence of leprosy. It is to be hoped that this Association will receive that financal support from the public without which little or nothing can be done, and that next year's report may be able to include a description of real progress in anti-leprous activities in Burma.

With regard to existing activities, leper colonies have flourished for some time at Mônywa and Minbu. A Roman Catholic Mission and the American Baptist Shan Mission ran successful colonies at Kengtung. During the year new colonies were opened in Meiktila, Salé and Magwe, while at Shwebo, Hlegu, Bhamo and Kyonmange it is anticipated that colonies will shortly be inaugurated. The authorities in Thatôn are also considering the

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possibility of opening a colony in that district. All these colonies have clinics attached to them, in which lepers, both colony inmates and outdoor patients, are treated by specially trained Sub-Assistant Surgeons on specific week days. Both the Mônywa colony with 97 inmates, and the Minbu colony with 53 inmates, have continued to work satisfactorily throughout the year. The colony run by the American Baptist Shan Mission at Kengtung has 625 inmates, while that managed by the Roman Catholic Mission at the same place, had 114 old inmates, with 55 new admissions during the year. Both these Missions are to be congratulated on their efforts to deal with this problem among the highly infected Shan villages. In June the colony at Meiktila was opened with 6 highly infectious male lepers, and by September this number was increased to II. It is most pleasing to be able to record here the assistance given to this new colony by local benefactors; Senator U Ba Nyan most generously donated a brick building for use as a clinic, and U Than Pe undertook the whole cost of a new cottage which is now under construction on the colony grounds. Both Magwe and Salé Colonies were opened in December, with accommodation for 18 and 8 lepers respectively. In actual fact there are 9 lepers at Salé as one lives in a separate cottage built by his relatives. This year also saw the opening of more clinics throughout the country, and there are now a total of 23 centres of this nature all over Burma. Attendance at Mônywa, Minbu, Meiktila, Yamèthin and Wakèma are all encouraging, while the number of treatments given to lepers at Hlegu, Dabein, Kyonmange, Sagu, Thazi, Mahlaing are all satisfactorily high. The new clinic in Ye-U is reported to be popular. Special mention should be made of the clinic at Shwebo which had an average attendance of 250 lepers, which is a record when compared with any other place in Burma.

The Mission to Lepers.—Report of Sixty-four Years Work in India and Burma.

As usual this is a most interesting and artistic production, iilustrated with many excellent photographs, and Mr. A. D. Miller, the Secretary, is to be congratulated on his work. There are now 10,590 lepers in institutions of the Mission and in subsidised homes, and an almost equal number are treated as out-patients. There are 965 healthy children of lepers in homes of the Mission, or in aided homes. Of an expenditure of £62,470, some £35,000 was met by voluntary contributions, the balance being Government and Local Board grants.

One of the oldest of the Leper Homes, that at Purulia, is celebrating its 50th anniversary this year. It says a great deal

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for the non-fatality of leprosy that two of the original lepers are still alive. A new leper home has just been opened in Fyzabad, United Provinces, so that the work of the Mission is still expanding.

In a review of the medical work, Dr. Lowe, of the British Empire Leprosy Relief Association (Indian Council), who acts as Honorary Medical Adviser to the Indian Auxiliary of the Mission to Lepers, writes:-"Generally speaking, in the homes of the Mission the number of infectious patients admitted is increasing and I think that this is as it should be. A non-infectious patient may be admitted, treated and discharged, but he occupies room which might otherwise be used by an infectious patient who is endangering the health of his relatives and associates. argument may be used that apart from treatment the slight case may become infectious. In some instances this argument may be true, but in many we know that it is not. It will thus be clear that the number of patients discharged is not necessarily a good indication of the quality of the medical work done. If in coming years the number of discharged patients falls, it will probably be due to the fact that more patients with the severer forms of leprosy are being admitted.

" In the course of my work I sometimes visit leprosy institutions, some run by the Mission to Lepers and others by other agencies. There are several things which often strike me about the institutions of the Mission compared with other institutions. The first is the excellence of the arrangements made for children. sometimes have to try to arrange for the admission of a child to a leper home and, if possible, I send the child to one of the homes of the Mission, because I know that there the child will be really well looked after. Another thing is the relatively high standard of the general health of the patients. They are usually healthy, bright, clean and free from secondary infections of the skin, such as scabies. This fact indicates a high standard of medical care. A third thing noticeable in the Mission's homes is that the patients have much to do, both work and recreation, while another is the spirit of the institutions, and the friendly relations between the staff and the patients, created largely because the staff have a real spirit of service. All these things indicate the great value of the medical work of the Mission."